
Medicare

Carriers Manual

Part 4 - Professional Relations

Department of Health &
Human Services (DHHS)
Centers for Medicare &
Medicaid Services (CMS)

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HEADER SECTION NUMBERS

1009.2 (Cont.)

PAGES TO INSERT

1-93 (1 p.)

PAGES TO DELETE

1.93 – 1.95 (3 pp.)

NEW/REVISED MATERIAL-- *EFFECTIVE DATE: October 25, 2002*
IMPLEMENTATION DATE: October 25, 2002

Section 1009.2, Surrogate UPINS, is revised to include instructions on handling situations when the use of surrogate UPINS is excessive.

Section 1009.3, Monitoring Compliance, is deleted. In 1994 the reporting requirement in this section was discontinued.

DISCLAIMER: The revision date and transmittal number only apply to the redlined material. All other material was previously published in the manual and is only being reprinted.

These instructions should be implemented within your current operating budget.

A. Residents.--Billers are to use the six (6) character surrogate UPIN RES000 for a physician meeting the description of "intern, resident", or "fellow" in MCM, Part 3, §2020.8A, if the individual does not have a UPIN. However, if a resident already obtained a UPIN, that number is to be used instead of the resident surrogate. If a physician leaves the hospital for private practice and did not receive a UPIN, the physician may continue to use the surrogate used in the hospital until a UPIN is assigned. In this case, do not grant the physician an extended period (more than 30 days from entry into private practice) to apply for a UPIN. Encourage all physicians not assigned a UPIN to apply.

B. Physician with Military, Department of Veterans Affairs and Public Health Service.--Physician/health care practitioners serving in the military or with the Department of Veterans Affairs or the Public Health Service are not exempt from the requirement to obtain a UPIN, particularly if they expect to provide services to Medicare beneficiaries or refer beneficiaries for other services. Until a UPIN is assigned, they are to use the following surrogate UPINs:

- o VAD000- Physicians serving on active duty in the military of the United States and those employed by the Department of Veterans Affairs.

- o PHS000- Physicians serving in the Public Health Service, including the Indian Health Service.

C. Retired Physicians.--These physicians are not issued UPINs and are to use the surrogate RET000. Retired physicians who are assigned a UPIN must use the assigned UPIN.

D. "Special Use" UPIN.--Situations may evolve that do not fall within the above categories. Therefore, one additional surrogate UPIN, OTH000 is provided. Instruct billers that they are to use OTH000 when:

- o The service being billed is a service included in the CWF TOS code 3, 4 or 5;
- o The ordering and performing physician (or other person) is not assigned a UPIN and does not qualify for any of the other surrogates listed above; and
- o A UPIN is required, but the ordering/referring physician has not been assigned one and does not qualify for one of the other surrogates.

OTH000 may be used for other situations beyond those specified above. Notify the RO if OTH000 is being used for other situations and identify those particular situations. Be mindful, however, that the goal is to assign a UPIN to every physician/health care practitioner and group practice that meets the Medicare definition.

Notify suppliers, physicians, or billers if their use of surrogates is excessive. If surrogate UPINs are over utilized, the Part B contractor via the UPIN Registry will confirm that a UPIN has not been assigned to the ordering/referring physician. When OTH000 is used, confirm that a UPIN is not assigned to the ordering/referring physician. If one is assigned, notify the physician of the assigned UPIN. If a UPIN is not assigned, notify the physician of the need to file an application for a UPIN.